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## APPLICANTS

Gerhard Brugger, Pflach, AUSTRIA;

2W  
 \* CONTINUING DATA \*\*\*\*\*

9W  
 \* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 10/15/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY AUSTRIA	SHEETS DRAWING 5	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Examiner's Signature <u>Sue Weaver</u> Initials <u>SW</u>				

ADDRESS  
 20995  
 KNOBBE MARTENS OLSON & BEAR LLP  
 2040 MAIN STREET  
 FOURTEENTH FLOOR  
 IRVINE , CA  
 92614

TITLE  
 Dosing dispenser and reservoir

FILING FEE  RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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